Approved for use through 07/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office: U.S. DEPARTIMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

	Complete if Known					
FEE TRANSMITTAL	Application Number	ТВА				
for FY 2004	Filing Date	October 15, 2003				
101 FT 2004	First Named Inventor	Janet A. Warrington				
Effective 10/01/2003. Patent fees are subject to annual revision.	Examiner Name	ТВА				
Applicant claims small entity status. See 37 CFR 1.27	Art Unit	TBA				
TOTAL AMOUNT OF PAYMENT (\$) 770	Attorney Docket No.	3525.1				

Check Credit card Maney Other None Other Othe	TOTAL AMOUN	T OF PAYMENT	(\$) 770		Attorne	y Dock	et No.	3525.1	·			
Check Crodit card Money Other None Coder None Coder None Coder None Coder None Coder None Code					FEE CALCULATION (continued)							
Deposit Account:												
Deposit Account Original processor Original	☐ Check ☐ Credit card ☐ Money ☐ Other ☐ None Order]		
Deposit Account Number O1-0431 Number O	☑ Deposit Account:							Fee Descr	iption	Fee Paid		
Deposit Account Name Charpe fee(s) indicated below S2 Credit any overpayments Charpe fee(s) indicated below S2 Credit any overpayments Charpe fee(s) indicated below. except for the filling fee to the above-Hernified deposit account. TEE CALCULATION 1251 100 1251 10							2051				 1	
Deposit Account Name Account Name The Director is authorized to: (check all that apply) Charge fee(s) indicated below Si Credit any overpayments and Charge are additional feets) during the pendercy of this application of SIR after Ecuminate action. When the above-dentified deposit account. The Birst Filling FEE Large Entity Fee Fee Fee Fee Fee Fee Peak CULATION 1252 470 1253 950 1254 1.840 1254 1.840 1255 110 1251 110 1251 150 1	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				1052	50	2052	25				
Apparents, Inc. Apparents,	Danasit				1053	130	1053	130			<u> </u>	
Name		Affymetrix, Inc.			1812	2,520	1812	2,520				
© Charge fee(s) Indicated below ☑ Cedit any overlayments Exharge any additional feets) during the pendency of this application of the pendency of this application of the pendency of this application of the above-kientified deposit account. Charge fee(s) Indicated below, except for the filling fee to the above-kientified deposit account. See	Name	Ab a land to leback at	that annivi		1804	920°	1804	820-	Examiner action			
Charge fee(s) indicated below, except for the fining fee to the above-kitentified deposit account 1251 110 1251 25 1251 25 1252 25 1251 25 125	ER Channa foodal in	wiested below DC Co	RASTERO VAR 1:NA	nents s application	1805	1.840*	1805	1,840°	Requesting publica Examiner action			
1. BASIC FILING FEE 1254 1.480 1255 1.480 1255 1.480 1255 1.480 1255 1.480 1255 1.480 1255 1.480 1255 1.480 1255 1.480 1255 1.480 1255 1.480	Charge any soc	ndicated below, excep	t for the filing fe	e	1251	110	2251	55	Extension for reply			
1. BASIC FILING FEE Larso Entity Small Enti	to the above-identi	fied deposit account.				420	2252	210	month			
BASIC FILING FEEL 1254 1,480 2254 740 Extension for reply within fitth month month 1256 2,010 1255 2,010 1255 1,005 Extension for reply within fitth month 1401 1302 1401 1303 2401 165 1602 1401 1303 2401 165 1602 1401 1303 2401 165 1602 1401 1303 2401 165 1602 1401 1303 2401 165 1602 1401 1303 2401 165 1602 1401 1303 2401 165 1602 1401 1303 2401 165 1602 1401 1303 2401 165 1602 1401 1303 2401 165 1602 1401 1303 2401 165 1602 1401 1303 1401					1253	950	2253	475				
Total Claims 1						1,480	2254	740	month			
1001 770 2001 385 Utility filing fee 770 1401 330 2401 165 1601 300 2401 165 1601 300 2401 165 1601 300 2402 170 Design filing fee 1403 390 2403 145 Request for oral hearing Petition to institute a public use 1451 1.510 1451 1.	Fee Fee F	ee Fee Fee De	scription	Eas Daid	1255	2,010	2255	1,005	Extension for reply			
1002 340 2002 170 Design filing fee 1403 290 2403 145 Request for oral hearing 1404 770 2004 345 Reissue filing fee 1451 1.510 1502 1502 1451 1.510 1502	100		Ton for		1401	330	2401	165		\vdash		
1003 530 2003 285 Plant filing fee 1403 290 2403 145 Pletition to institute a public use proceeding p	100.				1402	330	2402	165		├		
1004 770 2004 385 Relissue filing fee 1451 1.510 1451 1.510 proceeding proceeding proceeding 1452 110 2452 55 Petition to revive – unavoidable 1453 1.330 2453 665 1450	,002		-	\vdash	1403	290	2403	145				
SUBTOTAL (1) (3) 770	1000	2004 385 Reissu	e filing fee		1451	1,510	1451	1,510				
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE Extra Fee from Fee 1502 480 2502 240 2503 320 241 320	1005 160 2	2005 80 Provisi	onal filling fee		1452	110	2452	55				
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE Extra Fee from Fee	'	OUDTOTAL (4)		(\$) 770	1453	1,330	2453	665		 		
Total Claims	SUBTOTAL (1)			1501	1,330	2501	665	Utility Issue fee (or	—			
Total Claims	2 EXTRA CLA	UM FEES FOR UTI	LITY AND REIS	SSUE	1502	480	2502	240				
Total Claims 14 -20 " = 0	Extra Fee from Fee				1503	640	2503	•				
Total Claims 2					1480	130	1460					
Multiple Dependent Large Entity Small Entity Small Entity	Total Claims 14 - 20 - 15 - 15 - 15 - 15 - 15 - 15 - 15 - 1					50	1807	50				
Dependent Large Entity Small Entity Fee Fee Fee Fee Fee Fee Pescription Code (\$) Code (\$) 1202 18 2202 9 Claims in excess of 20 1201 88 2201 43 Independent claims in excess of 3 1204 86 2204 43 independent claim, if not paid 1204 86 2204 43 Whitiple dependent claims in excess of 20 1205 18 2205 9 We Reissue Independent claims over original patent SUBTOTAL (2) (\$) 0 SUBTOTAL (2) (\$) 0 Registration No. Referri(Tune) Registration No. Referri(Tune) Registration No. Referri(Tune) Registration No. Registration No. Registration No. Registration No. Referri(Tune) Registration No. Registration No. Registration No. Registration No. Referri(Tune) Registration No.		-3" = 0	×	= 0	1806	180	1808	180	Strnt			
Large Entity Fee Fee Fee Fee Fee Fee Fee Code (\$) Code (\$	Nuttiple X = 0					40	8021	40	per property (times number of			
Code (\$) Code (\$) Per Pasch Index Code (\$) Per Pasc	The state of the s				1809	770	2809	385	Filing a submission	ion		
1201 88 2201 43 Independent claims in excess of 3 1203 290 2203 145 Multiple dependent claim, if not paid 1204 86 2204 43 original patient 1205 18 2205 9 Regissue claims in excess of 20 and over original patient SUBTOTAL (2) (\$) 0 SUBMITTED BY Registration No.	Code (\$)	2202 9 C	tains in excess of	20	1810	770	2810	385	For each additional invention to be			
1203 290 2203 145 Multiple dependent claim, if not paid 1204 86 2204 43 or Reissue Independent claims over original patent 1205 18 2205 9 "Reissue claims in excess of 20 and over original patent SUBTOTAL (2) (\$) 0 SUBTOTAL (2) (\$) 0 To number previously paid, if greater, For Reissues, see above Complete (if applicable) Registration No. (Attorney/Agant) Registration No. (Attorney/Agant)	1 12-12	2201 43 lf	ndependent claims	in excess of 3		_				; _E)		
1204 86 2204 43 original patent 1205 18 2205 9 Reissue claims in excess of 20 and over original patent SUBTOTAL (2) (\$) 0 "To number previously paid, if greater, For Reissues, see above SUBMITTED BY Registration No. (Attorney/Agent) Registration No. (Attorney/Agent) Registration No. (Attorney/Agent) 1002 Other fee (specify) "Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 0 Complete (if applicable)		2203 145 N	futiple dependent	claim, if not paid	1801	770	280	1 385			~	
SUBMITTED BY Registration No.	1204 86	2204 43 0	riginal patent			900	180	2 900	Request for expedited examination of a design application			
SUBTOTAL (2) (\$) 0 Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 0 "or number previously paid, if greater, For Relssues, see above Complete (if applicable) SUBMITTED BY Registration No. (Attorney/Agant) Registration No. (Attorney/Agant) Registration No.	1205 18											
SUBMITTED BY Registration No. (Attorney/Agant) Registration No. (Attorney/Agant) Registration No. (Attorney/Agant) Registration No.	SUBTOTAL (2) (\$) 0											
SUBMITTED BY Registration No. /(Attorney/Agent) Registration No. /(Attorney/Agent) Telephone 408/731-5000												
Nome (Print/Type) Decrea E. Malone Registration No. / (Attorney/Agent) 40,078 Telephone 408/731-5000												
Name (Print/Type) Dadrés E. Malone (Alliame (All	Registration No.											
Oate October 15, 2003	140/14 (1,000.3) 50						14/4/0		Date	October 15, 2003		

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions. On the amount of time you require to complete this form and/or suggestions.

ON NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing this form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.